

Revised 06/08

**IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD**

510 EAST 12<sup>TH</sup>, SUITE 1A  
 DES MOINES, IA 50319  
 Fax: (515)281-4073  
 www.iowa.gov/ethics

**FORM-GB**

Gift or Bequest information received  
 by a department or accepted by the  
 Governor on behalf of the state

For office use only

Indexed \_\_\_\_\_  
 Audited \_\_\_\_\_  
 Checked \_\_\_\_\_  
 Computer \_\_\_\_\_

Iowa Code section 8.7 requires all gifts and bequests given to any department of the state of Iowa or received by the Governor on behalf of the state be reported to the Iowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

**DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:****Iowa Department of Public Safety**

Name of Department or Office  
 215 E 7th Street

Des Moines, IA 50319

Mailing Address  
 515-725-6132

City, State, Zip Code

Area Code &amp; Telephone No.

**CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE:**

Kevin Frempton, Director

Name

Mailing Address (if different from above)

City, State, Zip (if different from above)

frempton@dps.state.ia.us

515-725-6300

Email Address

Area Code &amp; Telephone Number (if different from above)

**DONOR OF GIFT OR BEQUEST:**

National Association of Drug Diversion Investigators, Inc.

Name

PO Box 611

Manchester, MD 21102-0611

Mailing Address

City, State, Zip Code

513-623-3278

Area Code &amp; Telephone Number

Email Address (optional)

June 9, 2009

\$25,000.00

Date of Gift or Bequest

Amount/Value

\*value is defined as "fair market value" of item as determined by  
 receiving department or office. If no value mark "0.00".

Provide a description of the gift or bequest and purpose thereof:

To fund the hiring of one employee for drug diversion.

Criteria to use this form:

Receipt of any gift or bequest that is received by any department of the state or received by the Governor on behalf of the state.

**Statement of Affirmation:**

I, Jeanie Flattery affirm that the gift or bequest reported above is accurate. I further affirm that the information concerning the donor and assessment of the fair market value (if applicable) is correct and true to the best of my knowledge.

Jeanie Flattery  
 Signature

July 30, 2009

Date

2009 JUL 30 PM 3:10

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CAMPAIGN DISCLOSURE BOARD